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B 10S2 (Supplement 2) (12/11)

expenses, and charges?

Yes. Date of the last notice:

No

# United States Bankruptcy Court

Western District of Tennessee

In re Tavares Sental Williams
Debtor

Case No. 16-29448
Chapter 13

Notice of Postpetition Mortgage Fees, Expenses, and Charges

If you hold a claim secured by a security interest in the debtor's principal residence, you must use this form to give notice of any postpetition fees, expenses, and charges that you assert are recoverable against the debtor or against the debtor's principal residence. File this form as a supplement to your proof of claim. See Bankruptcy Rule 3002.1.

Name of creditor: U.S. Bank Trust National Association, et al.

Court claim no. (if known): 1-1

Last four digits of any number you use to identify the debtor's account: 6 0 7 3

# Part 1: Itemize Postpetition Fees, Expenses, and Charges

mm/dd/yyyy

Does this notice supplement a prior notice of postpetition fees,

Itemize the fees, expenses, and charges incurred on the debtor's mortgage account after the petition was filed. Do not include any escrow account disbursements or any amounts previously itemized in a notice filed in this case or ruled on by the bankruptcy court.

Description	Dates incurred		Amount
1. Late charges		(1)	\$
2. Non-sufficient funds (NSF) fees		(2)	\$
3. Attorney fees		(3)	\$
4. Filing fees and court costs		(4)	\$
5. Bankruptcy/Proof of claim fees		(5)	\$
6. Appraisal/Broker's price opinion fees		(6)	\$
7. Property inspection fees		(7)	\$
8. Tax advances (non-escrow)		(8)	\$
9. Insurance advances (non-escrow)	09/04/2020	(9)	\$1,208.00
10. Property preservation expenses. Specify:		(10)	\$
11. Other. Specify:		(11)	\$
12. Other. Specify:		(12)	\$
13. Other. Specify:		(13)	\$
14. Other. Specify:	_	(14)	\$

The debtor or trustee may challenge whether the fees, expenses, and charges you listed are required to be paid. See 11 U.S.C. § 1322(b)(5) and Bankruptcy Rule 3002.1.

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B 10S2 (Supplement 2) (12/11)

Page 2

Part 2: Si	gn Here					
						rour title, if any, and state your address and telephone this Supplement applies.
Check the ap	opropriate box.					
I am the c		agent. (Attach copy	of power of atto	rney, if any.)	i .	
	ler penalty of per and reasonable b		ation provide	d in this No	tice is t	rue and correct to the best of my knowledge,
/s/Edware	d D. Russell				Date	11/10/2020 mm/dd/yyyy
Print:	Edward First Name	D. Middle Name	Russell Last Name		Title	authorized agent
Company	The SR Law Gr	oup			ł	
Address	PO Box 128 Number Mt Juliet City	Street	TN State	37121 ZIP Code		
Contact phone	(615) 559-3	3190			Email	erussell@thesrlawgroup.com



P O BOX 691690 SAN ANTONIO, TX 78269-1690

ESTATE OF GENEVA B JONES 4417 FIG LEAF CIR APT 3 MEMPHIS, TN 38109 September 8, 2020

Property Address: 1538 GOWAN DR MEMPHIS, TN 38127

Coverage Type: FIRE

Loan Number: XXXXXXXXXXXX26073

Mortgagee-Payee Clause: BSI FINANCIAL SERVICES ISAOA/ATIMA P O BOX 691690 SAN ANTONIO, TX 78269-1690

### Dear Estate Of Geneva B Jones:

This is your final notice that our records show that your insurance policy expired and we do not have evidence that you have obtained new coverage. **Because insurance is required on your property, we bought insurance for your property.** You must pay us for any period during which the insurance we bought is in effect, but you do not have insurance.

You should immediately provide us with your insurance information. Please ask your agent to provide the documentation by one of the convenient methods listed below. Please ensure that the documentation references your loan number and that the Mortgagee-Payee Clause reads as listed above.

The insurance we bought:

- Costs \$1,208.00 annually, which may be significantly more expensive than the insurance you can buy yourself.
- May not provide as much coverage as an insurance policy you buy yourself.

If you have any questions, please contact us at (833) 403-2932, Monday through Friday, 7:00 AM to 7:00 PM Central Time.

Sincerely,

**Insurance Department** 

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Page 2
Estate Of Geneva B Jones
XXXXXXXXXXXXXXXXXA6073

### IMPORTANT INFORMATION REGARDING REQUIRED INSURANCE

If you have already purchased insurance, or if you reside in a condominium or townhouse and are insured under a master insurance policy issued to your Homeowners Association, please provide us with a copy of your current policy. Please ensure the insurance policy you provide includes:

- · Full property address matching what is shown on the prior page
- Minimum coverage amount of \$142,100
- Coverage period with an effective date of 07/05/20
- Mortgagee-Payee Clause matching what is shown on the prior page
- Named insured
- Deductible amounts

The insurance we purchased will remain in effect until you provide us with other acceptable coverage. The policy will not provide coverage for liability, contents of the structure or for personal property, earthquake or flood. The amount of coverage may not be sufficient to fully rebuild or replace your structure in the event of a loss. The cost of this policy has been charged to you and you are responsible to pay for such amounts. You may obtain a refund for any unearned portion of these charges if you send us satisfactory proof that you have purchased your own insurance.

	G EVIDENCE OF YOUR INSURANCE IN ONE OF THE ODS LISTED BELOW.
ONLINE: www.imcovered.com/bsi AND BY ENTERING YOUR UNIQUE IDENTIFIER	EMAIL THE DECLARATION PAGE AS AN ATTACHMENT TO: bsi@imcovered.com
FAX POLICY DECLARATION PAGE TO: (888) 732-6325	MAIL POLICY DECLARATION TO:  BSI Financial Services P O Box 691690 San Antonio, TX 78269-1690

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Estate Of Geneva B Jones XXXXXXXXXXXXXXXXXX26073

# Licensed as Servis One, Inc. dba BSI Financial Services BSI Financial Services NMLS # 38078

If you have filed a bankruptcy petition and there is an "automatic stay" in effect in your bankruptcy case or you have received a discharge of your personal liability for the obligation identified in this letter, we may not and do not intend to pursue collection of that obligation from you personally. If either of these circumstances apply, this notice is not and should not be construed to be a demand for payment from you personally. Unless the Bankruptcy Court has ordered otherwise, please also note that despite any such bankruptcy filing, whatever rights we hold in the property that secures the obligation remain unimpaired.

Credit Insurance Division 1949 East Sunshine St. Springfield, MO 65899-0001

# MORTGAGOR'S NOTICE OF INSURANCE (EVIDENCE OF INSURANCE COVERAGE PLACED)

Borrower/Mortgagor Name: ESTATE OF GENEVA B JONES

Mailing Address:

4417 FIG LEAF CIR APT 3

**MEMPHIS, TN 38109** 

Date:

09/04/20

Master Policy Number:

HZ010020

**Certificate Number:** 

AMJ0058688

Insured Property Address: 1538 GOWAN DR

MEMPHIS, TN 38127

**Effective Date:** 

07/05/20

Named Insured/Mortgagee: BSI FINANCIAL SERVICES

1425 GREENWAY DRIVE, STE 400

**Expiration Date:** 

07/05/21

**IRVING, TX 75038** 

12:01 A.M. Local Standard Time at the address of the Insured Property

Loan Number:

Mailing Address:

XXXXXXXXXXXXX26073

The insurance afforded is only with respect to such of the following coverages as are indicated by specific premium charge or charges. The limit of our liability against each such coverage shall be as stated herein, subject to all the terms of this Notice of Insurance having referenced thereto.

**COVERAGE TYPE** FIRE

LIMIT OF LIABILITY (AMOUNT OF INSURANCE) \$142,100

**DEDUCTIBLE (IF ANY)** 

**RATE** 

**PREMIUM** 

\$1,208.00

\$1,000

Wind/Hail/Hurricane Deductible N/A

\$2,842

N/A

N/A

TOTAL PREMIUM:

\$1,208.00

Your lender/mortgagee has ordered insurance on the above listed property in the amount and premium indicated above. This insurance may not sufficiently protect your interest in the property and covers only loss to the insured structure. Coverage is limited to perils insured under our agreement with your lender and is subject to all limitations and exclusions set forth herein. Coverage is not afforded for building code upgrades unless added by endorsement and an additional premium is paid.

> This Notice of Insurance is for information purposes only. It neither amends, nor extends or alters the coverage afforded under the agreement it describes. Coverage as described herein is excess over any other valid and collectible insurance.

Please contact your lender if you have any questions about the placement of this coverage.

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### **CERTIFICATE OF SERVICE**

I hereby certify that on November 10, 2020, a true and correct copy of the Notice of Postpetition Mortgage fees, Expenses, and Charges was served by U.S. Mail, postage prepaid to the Debtor, Tavares Sental Williams, 1538 Gowan Drive, Memphis, TN 38127; and by electronic means as follows: counsel for the Debtor, S. Jonathan Garrett, 2670 Union Avenue Extended, Suite 1200, Memphis, TN 38112-4424; Sylvia F. Brown, 200 Jefferson Ave., Suite #1113, Memphis, TN 38103 and electronically to those identified on the CM/ECF system for this case.

By: /s/Edward D. Russell
Edward D. Russell

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# CERRITION OF SERVICE

I handly confity that on November 20, 2020, where and conget copy of the Notice of Rostpolition Manager took Ligarance, and Charges with convert by 0.8 Mark, postage propried to Denion. Convert Senail Williams, 1532 things with Memphis USE 8127, and by electronic means as follows: conget for the Debion St. London Garrett 2670 I falon Av. and Introduct. Suite 1200. Memphis, 100 3068630, Av. and Introduct. Suite 1200. Memphis, 100 3068630, Ave. Suite 2011. Moraphis, 100 310 310 and should be transfer this case.

Warri Chronid o vi Hongo Chrowbii